2182

Attorney Docket No.: CYPR-CD00205



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

bearing F		Postage	e and addressed to the (	Commissioner	for Patents P.	D. Box 1450, A	Alexandria,	, VA 22	313-1450,	on the	e below date	
Date of Deposit:	11/07	/03	Name of Person Making the Deposit:	KATHERIN	E RINALDI	Signature of Making the I		that	hexa	U/	Rinal	<b>2</b>
In re Ap	oplicatio	n of: L	_ane Hauck and T	imothy D	Jordon			, .		·		
Serial N	No.:	09/	778,233		Examiner:	Casiano	, A.					
Filed:	02/06	/01			Art Unit: 2	182					•	
			APPARATUS FOR EVICE MEMORY		'IC DETEC	TION OF	A SERI	IAL P	ERIPHE	ERAL		
Commissioner for Patents P.O. Box 1450								RECEIVED				
Alexan	dria, VA	223	13-1450	AMEN	IDMENT T	RANSMITT	AL				NOV 1	<b>3</b> 2003
1. Transmitted herewith is an amendment for this application									Technology Center 2100			
( X Tra	( <u>27</u> ansmitte her: 2 s	she ed her sheets	rewith is a responsets) rewith are1 s of Proposed Dra	sheet called the same shaped the same sh	of Replacer			ified p	atent ap	plica	ation.	
				Exten	sion of	Term						
3.	The pro	oceed	dings herein are fo	r a patent a	application	and the pro	ovisions	of 37	C.F.R.	1.13	6 apply.	
(a)	[]	Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)										
•			Extension [ ] one month [ ] two months [ ] three mont [ ] four months	s hs	\$4: \$9:	<u>e</u> 10.00 20.00 50.00 480.00						
					<u>F e</u>	e \$						
If an ad	ditional	exten	ision of time is req	uired, plea	se conside	r this a peti	ition the	refor.				
(b) [X] Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.												

Attorney Docket No.: CYPR-GD00205

## Fee Calculation

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

(for other than a small entity)										
Fee Items	Claims Remaining After Amendment	Highest Number of Claims Previously Paid For	Present Extra Claims	Fee Rate	Total					
Total Claims	27	- 27 =	0	x \$18.00	\$0.00					
Independent Claims	3	- 3 =	0_	x \$86.00	\$0.00					
Multiple Dependent Claim Fee (one or more, first added by this \$290.00 amendment)										
Total Fees										

## **PAYMENT OF FEES**

- 5. The full fee due in connection with this communication is provided as follows:
- [ X ] The Commissioner is hereby authorized to charge any additional fees associated with this communication or credit any overpayment to Deposit Account No.: 23-0085.
   A duplicate copy of this authorization is enclosed.
- [ ] A check in the amount of \$\frac{\xi}{2}\$
- [ ] Charge any fees required or credit any overpayments associated with this filing to Deposit Account No.: 23-0085.

Please direct all correspondence concerning the above-identified application to the following address:

WAGNER, MURABITO & HAO LLP

Two North Market Street, Third Floor San Jose, California 95113 (408) 938-9060

Respectfully submitted

Date: 7 November 2003

Reg. No. 46,315